

**2017****Berean Academy Pre-Registration****2018**

Accredited by

**2016-2017 Grade Level:****Today's Date:**

Last Name:

First Name:

M.I.

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Gender: M F

State/Country of Birth:

US Citizen: Y N

Ethnicity: (circle only one)

African American/Black

Asian

Hispanic

Native American

Caucasian/White

Language **most spoken in the home** is:Language **most spoken by the student** is:Language **first spoken by the student** was:

1-Parent/Guardian Name:

relationship:

lives with: Y N

Home Phone:

Cell Phone:

Work Phone:

Email:

2-Parent/Guardian Name:

relationship:

lives with: Y N

Home Phone:

Cell Phone:

Work Phone:

Email:

Parent/Guardian Address:

(where student lives)

Last school student attended:

Include address and phone number if available

Has the student received any of these services? (circle all that apply)

Special Education

504 Plan

Speech/Hearing

IEP

Occupational Therapy

Title I

ESL (English as a 2<sup>nd</sup> Language)

Has student ever been expelled or received a long-term suspension? Y N

Does student have siblings enrolled at Berean Academy? If yes, name/grade:

Does student have siblings on the Wait List? If yes, name/grade:

Parent/Guardian Signature:

Date:

**Office Use Only**

Date added to Wait List:		Position on Wait List:	
Principal Conference:		1 <sup>st</sup> Offer:	
Teacher Conference:			
Reg. Pkt. Picked up:			
Registration Appt:			
Date added to Count:		Date added to SchoolMaster:	